



I hereby authorize the Pension Fund staff to release information to the following individuals. This will stay in place unless it is revoked in writing.

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
I hereby revoke the authorization for the Pension Fund staff to release information to the following individuals.

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness